IOWA DEPARTMENT OF HUMAN SERVICES

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> TITLE XIX REPORT OF EXPENDITURES (BY CATEGORY OF SERVICE) (MONTHLY TOTALS AS OF 08/31/13)

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					COST PER	COST PER UN		COST PER	
CATEGORY OF SERVICE	RECIPIENTS N	UMBER OF	UNITS OF	TOTAL	UNIT OF	ELIGIBLE F			
	SERVED	CLAIMS	SERVICE	PAYMENT	SERVICE	RECIPIENT	SERVED	SERVED	
INPATIENT	•			\$36,355,676.57		\$70.90		\$2,767.22	
OUTPATIENT				\$24,608,324.52	\$11.82	\$47.99		\$208.92	
CHILD PART HOSP	0		0	\$0.00	\$0.00	\$0.00		\$0.00	
CHILD DAY TREATMENT	0		0	\$0.00	\$0.00	\$0.00		\$0.00	
ADULT PART HOSP	0	_	0	•	\$0.00	\$0.00		\$0.00	
ADULT DAY TREATMENT	0		0		\$0.00	\$0.00		\$0.00	
SKILLED NURSING FACILITY	747			\$2,593,277.03	\$231.23	\$5.06		\$3,471.59	
INTERMEDIATE CARE FACILITY	11,292	11,816	346,710	\$42,929,956.68	\$123.82	\$83.72		\$3,801.80	
INTER CARE MENTAL RETARDA	1,719	1,834	54,773	\$21,662,365.11	\$395.49	\$42.25		\$12,601.72	
NURSING FAC FOR MENTAL ILL	92							\$7,958.57	
HOME HEALTH	11,640			\$11,088,898.74	\$32.98			\$952.65	
LEAD INSPECTION AGENCY		3		\$1,086.18					
PHYSICIAN				\$16,201,263.46	\$36.86				
CLINIC SERVICES				\$4,145,559.82	\$33.67			\$223.22	
MEP CASE MANAGEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
EHR INCENTIVE PAYMENTS	1	0	0	\$0.00 \$514,104.00	\$0.00	\$1.00	.0	\$514,104.00	
LAB AND RADIOLOGICAL	12,858	17,935	31,571	\$666,638.68	\$21.12	\$1.30	2.5	\$51.85	
HABILITATION SERVICES	1,437	2,337	14,762	\$1,103,676.74	\$74.76	\$2.15	10.3	\$768.04	
BEHAVIORAL HLTH INTERVENTN SVC	386,998	417,715	417,386	\$5,391,194.38	\$12.92	\$10.51	1.1	\$13.93	
REHAB SUPPORT SERVICES	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
AMBULANCE SERVICES	2,767	3,276	3,240	\$374,931.00	\$115.72	\$0.73	1.2	\$135.50	
LOCAL EDUCATION AGENCY		7,282		\$3,696,110.85	\$9.36	\$7.21	338.9	\$3,172.63	
INFANT TODDLER	41	69		\$938.10	\$6.95	\$0.00	3.3	\$22.88	
PRESCRIBED DRUGS	120,668	378,600	321,820	\$18,891,784.37	\$58.70	\$37.84	2.7	\$156.56	
IOWA-PLAN-PMIC		250,981		\$2,698,404.94	\$10.76	\$5.26		\$11.62	
DRUG CAPITATION	. 0	. 0	. 0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
NEMT SERVICES	386,525	405,271	405,074	\$814,190.55	\$2.01	\$1.59			
INDIAN HEALTH SERVICES	Π	· o	· o	\$0.00	\$0.00	\$0.00			
FAMILY PLANNING SERVICES	5,988	6,504	6,654	\$589,884.20	\$88.65	\$1.15			
	. 0	. 0		\$0.00	\$0.00	\$0.00			
IOWA PLAN PROGRAM	386,997	417,705	417,283	\$0.00 \$11,543,044.20 \$0.00	\$27.66	\$22.51			
MANAGED SUBSTANCE ABUSE	0	0	0	\$0.00	\$0.00	\$0.00		\$0.00	
MENTAL HEALTH ACCESS PLAN	0	0	0	\$0.00	\$0.00	\$0.00		· ·	
EPSDT SCREENING	7,794	6,050	6,017	\$2,109,557.50	\$350.60	\$7.94	.8	\$270.66	
HMO SERVICES	31,144	32,335	32,331	\$5,664,132.23	\$175.19	\$1,702.99	1.0	\$181.87	
PACE SERVICES	192	192	192	\$617,528.98	\$3,216.30	\$1.20	1.0	\$3,216.30	
PATIENT MANAGEMENT	186,650	186,647	186,641	\$373,282.00	\$2.00	\$63.28	1.0	\$2.00	
HEALTH INS PREMIUM PAYMENT	3,339	7,821	7,821	\$590,308.89	\$75.48	\$1.15	2.3	\$176.79	
MEDICAL SUPPLIES	25,016	41,735	1,934,604	\$3,924,501.51	\$2.03	\$7.86	77.3	\$156.88	
HEALTH HOME PROVIDER	13,936	14,036	14,290	\$1,972,365.21	\$138.02	\$3.85	1.0	\$141.53	
OTHER PRACTITIONER	16,886	28,861	84,603	\$2,999,659.30	\$35.46	\$5.85	5.0	\$177.64	
FAMILY CENTERED PROGRAM	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
FAMILY PRESERVATION	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
TREATMENT FOSTER FAMILY CARE	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
GROUP TREATMENT THERAPY	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00	
DENTAL	29,933	36,301	36,508	\$4,812,469.89	\$131.82	\$9.64	1.2	\$160.77	
OPTOMETRIST	13,372	15,907	16,890	\$945,714.36	\$55.99	\$1.84	1.3	\$70.72	
CHIROPRACTIC	7,906	13,723	16,384	\$379,710.98	\$23.18	\$0.76	2.1	\$70.72 \$48.03	
IOWA-PLAN-HAB	7,906 386,796	410,401	407,531	\$7,522,512.28	\$23.16 \$18.46	\$14.67	1.1	\$19.45	
IOWA-LPWA-HWD	300,790	410,401	401,331	41,366,316.60	410.40	917.07	1.1	413.43	

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TITLE XIX REPORT OF EXPENDITURES
(BY CATEGORY OF SERVICE)
(MONTHLY TOTALS AS OF 08/31/13)

CATEGORY OF SERVICE	RECIPIENTS NUMBER OF		UNITS OF	TOTAL	COST PER UNIT OF		ITS PER ECIPIENT	COST PER RECIPIENT				
	SERVED	CLAIMS	SERVICE	PAYMENT	SERVICE	RECIPIENT S	SERVED	SERVED				
PODIATRIC	4,653	5,427	6,800	\$199,287.05	\$29.31	\$0.39	1.5	\$42.83				
PHYSICAL DISABILITIES SVCS	713	963	95,038	\$346,243.45	\$3.64	\$0.68	133.3	\$485.61				
BRAIN INJ WAIVER SERVICES	1,133	2,009	149,335	\$2,263,493.14	\$15.16	\$4.41	131.8	\$1,997.79				
PSYCHIATRIC	3,871	6,639	7,308	\$219,916.54	\$30.09	\$0.43	1.9	\$56.81				
RESIDENTIAL CARE FACILITY	1,199	1,490	42,858	\$361,380.74	\$8.43	\$0.70	35.7	\$301.40				
ID WAIVER SERVICE	10,663	20,581	1,342,028	\$33,204,902.30	\$24.74	\$2,743.75	125.9	\$3,114.03				
CHILDRENS MENTAL HEALTH SVC	687	1,064	137,583	\$661,960.20	\$4.81	\$667.97	200.3	\$963.55				
AIDS WAIVER SERVICES	29	50	7,478	\$25,978.61	\$3.47	\$811.83	257.9	\$895.81				
ELDERLY WAIVER SERVICES	8,459	23,580	999,707	\$5,778,002.14	\$5.78	\$639.94	118.2	\$683.06				
ILL & HANDICAPPED WAIVER SVCS	1,890	2,810	250,254	\$1,635,819.66	\$6.54	\$662.54	132.4	\$865.51				
COUNTY OFFICE REIMBURSEMENT	0	0	0	\$0.00	\$0.00	\$0.00	.0	\$0.00				
MEP SERVICES	4,398	5,993	25,102	\$1,222,648.66	\$48.71	\$2.38	5.7	\$278.00				
UNASSIGNED	36	0	0	\$2,675,270.44-	\$0.00	\$5.22-	.0	\$74,313.07-				
* ALL CATEGORIES *	444,960	3,160,039	11,491,097	\$281,759,603.67	\$24.52	\$549.51	25.8	\$633.22				
*** END OF REPORT ***												